

H-1300 SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB)

H-1310 GENERAL INFORMATION

Effective January 1, 1993, the Omnibus Reconciliation act (OBRA) of 1990 required payment of Medicare Part B premiums for a mandatory eligibility group of low income Medicare beneficiaries called Specified Low Income Medicare Beneficiaries or SLMB.

The applicant/enrollee must meet all SLMB requirements.

A SLMB must:

- be enrolled in Medicare Hospital Insurance (Part A),

Note:

The applicant/enrollee does not have to be currently enrolled in Part B. The State Buy-in System will either start Part B coverage or override the applicant/enrollee's refusal of Part B. The applicant/enrollee does not have to be referred to SSA to enroll in Part B, and

- have income greater than 100 percent but less than 120 percent of the FPIG.

NOTE:

In January of each year, disregard the SSA cost of living adjustment (COLA) until the allowed limits are increased **. Thereafter, determine eligibility using all income including the COLA for the year.

- Have resources that do not exceed program limits (See [Z-900 Resource Limits by Program](#)), and
- Meet all non-financial eligibility requirements for Medicaid.

SLMB eligibles have been divided into two categories:

- SLMB Only: eligible for the limited SLMB services only, and
- SLMB Plus: eligible for Medicaid and SLMB services.

The eligibility determination is the same for both the “SLMB Only” and “SLMB Plus”.

H-1310.1 COVERAGE

SLMB Only

- Medicaid payment of the Part B premium only, and
- The enrollee does not receive a Medicaid Eligibility Card (MEC).

SLMB Plus

- Medicaid payment of the Part B premium,
- The full range of Medicaid services as entitled by Medicaid in any other category of assistance, and
- The enrollee receives a MEC.

Note:

Although the BHSF Form 1-MB Application for Medicare Savings Program is commonly used to apply for initial or continued SLMB Plus benefits, it is also acceptable to use BHSF Form 1-A Application for Health Coverage.

An SLMB Plus enrollee may continue to be eligible as a SLMB Only, when the full Medicaid case closes.

H-1321 ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-1321.1 DETERMINE ASSISTANCE UNIT

The assistance unit includes the applicant/enrollee. Both members of a couple may be applying, but each is certified separately.

H-1321.2 ESTABLISH CATEGORICAL REQUIREMENT

Verify enrollment in Medicare Part A for the applicant/enrollee. Part A eligibility, the Part A start date, and the Medicare claim number may be verified via SOLQ or BENDEX.

H-1321.3 ESTABLISH NON-FINANCIAL ELIGIBILITY

Verify eligibility for each member of the assistance unit with regard to the following factors:

- [Assignment of Third Party Rights](#) [I-200](#)
- [Citizenship/Alien Status](#) [I-300](#)
- [Enumeration](#) [I-600](#)
- [Residence](#) [I-1900](#)

H-1321.4 ESTABLISH NEED**A. Determine Composition of the Income/Resource Unit**

The income/resource unit includes the:

- applicant/enrollee,
- applicant/enrollee and ineligible spouse living in the home, or
- applicants/enrollees who are a couple.

Note:

If the SSA considers the applicants/enrollees as a couple for SSI, they are considered as an eligible couple for the purposes of budgeting in the Medicare Savings Programs (QI, QMB, SLMB). A categorically eligible spouse is one who is aged, blind, or disabled and does not have to be entitled to Medicare for the couple to be considered an eligible couple.

B. Determine Need/Countable Resources

Determine total countable resources of the members of the income/resource unit. Refer to [I-1680, Need-Resources, Programs Not Related to LIFC or SSI](#).

Accept the household's statement of resources unless other objective evidence establishes that the situation is questionable. Verification of countable resources is not required and should not be routinely requested.

Compare countable resources to SLMB resource limits:

- for an individual, if there is no spouse, or
- for a couple, if there is a spouse (eligible or ineligible).

Refer to [Z-900 Resource Limits by Program](#).

If countable resources are greater than the limit, the applicant/enrollee is resource ineligible.

If countable resources are equal to or less than the limit, the applicant/enrollee is resource eligible. Continue determination of need.

C. Determine Need/Countable Income

Individual

If the applicant/enrollee is an individual with no spouse or with an ineligible spouse with no income, compare to SLMB standard for one person.

Complete the following budget steps:

- Step 1. Determine total unearned income.
- Step 2. Subtract \$20 SSI disregard from unearned income.
- Step 3. Determine total gross earned income.
- Step 4. Subtract any remainder of \$20 SSI disregard from gross earnings.
- Step 5. Subtract earned income deduction from remaining gross earnings. Earned income deduction is \$65 and one half of remainder of earnings.
- Step 6. Combine remainders from Step 2 and Step 5.

Step 7. Compare to Income Standard for Individual.

If income is equal to or greater than the individual limit, the applicant/enrollee is ineligible.

Ineligible Spouse Deeming

If there is an ineligible spouse with income, complete budget Steps 1 through 7 above using only the applicant/enrollee income. If the income is equal to or greater than the individual limit, the applicant/enrollee is ineligible and there is no deeming. Consider for MNP.

If the applicant's/enrollee's income is less than the SLMB standard for one, apply deeming policy ([See I-1420 Need - Deeming](#)). Go to Step 1 of the couple budget.

Couple

If both members of a couple are potentially eligible, or if there is income remaining in the deeming process, complete the following steps:

Step 1. Determine the countable unearned income. For a couple, combine all unearned income.

Note:

When deeming income from an ineligible spouse, the income of the ineligible spouse remaining after allocation for ineligible children is combined with the income of the eligible spouse. The couple is then treated the same as an eligible couple for budgeting purposes.

Step 2. Subtract one \$20 SSI disregard per income unit, if applicable.

Step 3. Determine total gross earned income by combining the couple's gross earned income.

Step 4. Subtract any remainder of \$20 SSI disregard from gross earnings.

Step 5. Subtract one earned income deduction from the remaining gross earnings of the income unit. The earned income

deduction is \$65 and one half of the remainder of the earnings.

Step 6. Combine the remainders in Step 2 and Step 5.

Step 7. Compare total countable income to the SLMB standard for number in the income/resource unit.

If the income is equal to or greater than the SLMB standard for a couple, the applicant/enrollee is not eligible.

If the income is less than the SLMB standard for a couple, the applicant/enrollee is income eligible. Refer to [Z-200 Federal Poverty Income Guidelines](#).

Exception:

If a couple, both SLMB applicants/enrollees are in a nursing facility or receiving Waiver services, consider income using the method that is most advantageous.

If one spouse is in a nursing facility or receiving Waiver services and his spouse is at home and not receiving Waiver services, consider income of each individual for separate SLMB decisions.

H-1321.5 ELIGIBILITY DECISION

Evaluate all eligibility requirements and verification received to make the eligibility decision.

H-1321.6 CERTIFICATION PERIOD

The certification period may be effective no earlier than three (3) months prior to the application date provided the individual is otherwise eligible and is enrolled in Medicare Part A. The months of retroactive coverage are not included in the twelve (12) month certification period. The certification period begins with the month of application.

H-1321.7 NOTICE OF DECISION

Send the appropriate Notice of Decision to the applicant/enrollee.

Note:

Applicants enrolled in Medicare Part A and found ineligible for Medicaid, are not referred to the Federally Facilitated Marketplace (FFM).